PATENT APPLICATION FEE DETERMINATION RECOR								Application or Docket Number D					
Effective October 1, 2000								09784253					
CLAIMS AS FILED - PART I								MALL E	NTITY		OTHER		
TC	TAL CLAIMS	· · · · · · · · · · · · · · · · · · ·	(Column 1) (Colu			mn 2) TYPE				OR 1 1	SMALL	:	
FOR			NUMBER		NUMBER EXTRA			RATE ASIC FEE	FEE 355.00	1 1	RATE	FEE	
<u> </u>	TAL CHARGEA	DI E CLAIMS							355.00	OR	BASIC FEE	· 710.00	
				us 20=	* 0			X\$ 9=		OR	X\$18=	\	
<u> </u>	EPENDENT CL	·		nus 3 =		0	L	X40=		ÖR	X80=		
IVIO	LIPLE DEPEN	DENT CLAIM P	IESENI					+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						ــا	TOTAL		OR	TOTAL	210,00		
CLAIMS AS AMENDED - PART II								•		,	OTHER	3	
_		(Column 1) CLAIMS		(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL ENTITY		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**	-	= .		X\$ 9=		OR	X\$18=	·	
AME	Independent	*	Minus	***		=		X40=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=			+270=		
		•					L	TOTAL		OR	TOTAL		
	(Column 1) (Column 2) (Column 3)						AD	DIT. FEE		OR	ADDIT. FEE		
B		CLAIMS REMAINING		HIGH	IEST				ADDI-			ADDI-	
DMENT		AFTER AMENDMENT		PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
ND	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AMEN	Independent	* NTATION OF MU	Minus	***	CLAINA			X40=		OR	X80=	×.	
_	FIRST PRESE	NTATION OF MIC	DETIPLE DEF	ENDENT	CLAIM		'	+135=		OR	+270=		
											TOTAL		
		(Column 1)		(Colur	mn 2)	(Column 3)	AD	DIT. FEE		JOH,	ADDIT. FEE		
ပ		CLAIMS REMAINING		HIGH NUM	EST				ADDI-	ı		ADDI-	
AMENDMENT C		AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
ND	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	·	
ب	FIRST PRESE	NTATION OF MU	DETIPLE DEF	ENDENI	CLAIM			105			1270		
• [f the entry in colur	nn 1 is less than th	e entry in colu	mn 2, write	"0" in col	lumn 3.	L	+135= TOTAL		OR	+270= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE ADI													

									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective January 1, 2003									09 754253				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OR	OTHER THAN OR SMALL ENTITY		
TC	TAL CLAIMS							RATE	FEE]	RATE	FEE	
FC	В		NUMBER FILED		NUMBER EXTRA			BASIC F	EE 375.00	OR	BASIC FEE	750.00	
TC	TAL CHARGE	ABLE CLAIMS	minus 20=		*			X\$ 9-	=	OR	X\$18=	•	
INE	EPENDENT CI	LAIMS	minus 3 =		*			X42=	:	OR	X84=		
ML	LTIPLE DEPEN	NDENT CLAIM P	RESENT	ESENT				+140=		OR	+280=		
* If	* If th difference in column 1 is less than zero, enter "0" in column 2							TOTA		OR	TOTAL		
CLAIMS AS AMENDED - PART II							*	OTHER THAN					
		(Column 1)		(Colun		(Column 3)		SMAL	L ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID I	BER OUSLY	PRESENT EXTRA	*	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	* 8	Minus	2	0	= /		X\$ 9=		OR	X\$18=	**************************************	
AME	Independent	* I	Minus	***	<u>3-</u>	4		X42=		OR	X84=		
L	FINOT PRESE	NIATION OF MI	ITATION OF MULTIPLE DEP			ENDENI CLAIM []		+140=		OR	+280=		
								TOT/	J. S. 4 1	OR	TOTAL ADDIT, FEE		
	(Column 1) (Column 2) (Column					(Column 3)							
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON NO	Total	• &	Minus	**				X\$ 9=		OR	X\$18=		
AME	Independent	* *	Minus	***	O. 1114			X42=		OR	*X84=		
. .	×2"	NIAHON OF MI	ILTIPLE DEPENDENT C		CLAIM			+140=		OR	+280=	* (*)	
								TOTA		OR	TOTAL ADDIT: FEE	*	
		(Column 1)		(Column 2) (Column 3)					T				
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT C	Total	*	Minus	t t		5		X\$ 9=		OR	X\$18=		
	Independent		Minus	4##		=		X42=		OR	X84≃		
	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT	CLAIM		!	+140=			+280=		
* ((* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR OR	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
The trighteen removaly rate roll (rotation in dependent) is the nighteen number found in the appropriate box in country 1.													